



PANDEMIC INFLUENZA U • P • D • A • T • E



Public Health Prepares

March 9, 2006

Fast Facts

Currently, HHS's National Institute of Allergy and Infectious Diseases (NIAID) is testing a range of vaccine concentrations, known as dosage levels, of the Sanofi Pasteur H5N1 vaccine to evaluate safety and immunogenicity.

The NIAID clinical trials are testing a vaccine made with the H5N1 strain of influenza, which mainly infects birds and other small animals. H5N1 has infected 175 humans worldwide to date.

Persons interested in participating in a clinical trial of candidate H5N1 vaccines can monitor www.ClinicalTrials.gov for ongoing and upcoming clinical trials information.

If You are Asked . . .

"We are seeing more and more countries with H5N1 in birds. What is the most likely way for H5N1 or pandemic flu to arrive in the United States?"

Migratory birds, the poultry trade, and human travel are among the possible mechanisms that experts believe could introduce H5N1 or pandemic flu into the United States. Public health officials are monitoring these and other possible mechanisms as priorities for the health of the nation.

Based on concerns about highly pathogenic avian influenza (HPAI) H5N1 virus and its potential to cause illness in humans, CDC and the U.S. Department of Agriculture (USDA) have taken steps to prevent importation of birds and bird products from countries where the virus has been detected.

USDA's Animal and Plant Health Inspection Service (APHIS) works to keep HPAI from becoming established in the U.S. poultry population. For information about APHIS' avian influenza activities, visit <http://www.aphis.usda.gov/index.shtml>

For more information about the pandemic flu visit www.pandemicflu.gov

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Citizen Voices on Pandemic Flu Choices: A Report of the Public Engagement Pilot December 2005

In December 2005 the Public Engagement Pilot Project on Pandemic Influenza (PEPPPI) report was published. This project was initiated by Roger Bernier, PhD, MPH, and Senior Advisor for Scientific Strategy and Innovation at the National Immunization Program, along with other partners in July 2005. The objectives of the project were to discuss and rank goals for a pandemic influenza vaccination program and to pilot test a new model for engaging citizens on vaccine-related policy decisions (The Vaccine Policy Analysis Collaborative, VPACE).

The anticipated major benefits from this public consultation were 1) the development of an improved plan to combat pandemic influenza and one more likely to gain public support, and 2) a demonstration that citizens can be productively engaged in informing vaccine related policy decisions.

Approximately 300 participants with diverse backgrounds and points of view came together to:

- learn the basic facts needed to have an informed discussion about pandemic influenza,
- engage in discussions about potential goals for the use of limited supplies of vaccine,
- weigh the tradeoffs between competing goals, and
- select the goals considered most important to achieve with scarce vaccine.

According to Dr. Bernier, one of the most important achievements of the Pilot Project was the “proof of principle, and by that I mean, being able to demonstrate that citizens really could learn what they needed to know to have informed opinions about an important public health issue, exchange views respectfully, and reach an agreement about the question at hand that was ultimately considered and found useful by government decision makers at the national level.”

Dr. Bernier also stated that he learned a critical lesson “understanding that one cannot ask citizens for their input on a predetermined question without at the same time respecting their intelligence, judgment, and experience and being open to the possibility that they will reframe or remold the question and produce unexpected insights.”

More public discussion of a similar type was called for in the HHS pandemic influenza plan.

The full report can be found at:

<http://www.keystone.org/spp/health-pandemic.html>

Update on H5N1: Global Activity Humans and Birds

Humans: During recent outbreaks since 2004, there have been 175 confirmed cases in humans and 95 deaths. They occurred in the following nations: Vietnam 93 cases and 42 deaths; Thailand 22 cases and 14 deaths; Indonesia 27 cases and 20 deaths; China 15 cases and 9 deaths; Cambodia 4 cases and 4 deaths; Turkey 12 cases and 4 deaths; and Iraq 2 cases and 2 deaths.

Birds Since December 2003, avian influenza A (H5N1) infections in poultry or wild birds have been reported in the following countries: Nigeria, Cambodia, China, Indonesia, Japan, Laos, Malaysia, Mongolia, Thailand, Vietnam, Austria, Azerbaijan, Bosnia, Bulgaria, Croatia, France, Germany, Greece, Hungary, Italy, Romania, Russia, Serbia, Slovak Republic, Slovenia, Switzerland, Turkey, Ukraine, Egypt, Iraq, Iran, India, Kazakhstan, Pakistan

For the most recent reports, please go to the following link:

<http://www.who.int/csr/outbreaknetwork/en/>.

CDC Recommends . . .

HHS Urges Americans to Stockpile Food, Water, and Medicines in Case of Outbreak

The federal government recently urged Americans to stockpile food and medicine in an effort to prepare for what officials warn could be widespread disruptions in the event of an influenza pandemic.

An influenza pandemic is a global outbreak that occurs when a new influenza A virus causes serious human illness and spreads easily from person to person, according to CDC.

PANDEMIC INFLUENZA UPDATE

Experts inside and outside the government have warned of a public health crisis if a highly pathogenic virus like the H5N1 avian influenza virus begins to infect large numbers of humans. An influenza pandemic would likely interrupt nearly every aspect of normal life, such as schools, workplaces, grocery stores, and even utilities which may shut down.

Individuals may gain peace of mind by creating their own personal stockpiles of food, water, and basic medicine. This would do little to stop the spread of a pandemic virus, experts acknowledge; however, it could help lessen the social impact if services and institutions are debilitated, officials say.

"Our goal here is to help people prepare, not to panic," says Christina Pearson, a spokeswoman for the Department of Health and Human Services (HHS), which urged the actions. "Through preparation people can gain peace of mind knowing they've done what they can do."

A checklist that calls on individuals to plan for transportation disruptions as well as work and school closings has been prepared. It also calls on households to store supplies of nonperishable food, water, and medicines for use in the event of an outbreak.

The checklist can be found at <http://www.pandemicflu.gov/plan/tab3.html>

Pass this on . . .

According to the U.S. Department of Agriculture, there is no evidence that anyone has been infected with H5N1 influenza or other bird flu viruses by eating properly cooked poultry or poultry products (e.g., eggs) derived from infected birds. Cooking food thoroughly as recommended by USDA

will kill bird flu virus and other infectious agents if they are present. Nearly all of the more than 175 human cases of H5N1 influenza that have been diagnosed recently have resulted from direct contact with infected chickens, ducks, turkeys, or their environment. This suggests that close contact with infected birds has been the primary route of transmission for avian H5N1 virus infections rather than eating food derived from infected birds.

For more information about food safety and avian H5N1 influenza, visit <http://www.usda.gov/wps/portal/!ut/p/s.7.0.A/7.0.1OB?contentidonly=true&contentid=2005/11/0511.xml>

Where to Find Out More . . .

The Department of the Interior is responsible for managing wildlife, including migratory birds, under various laws and treaties, and for ensuring public health on more than 500 million acres of land across the country. To carry out these responsibilities, the Department and its partners are investigating HPAI in migratory birds and making plans to protect the health of employees and the 450 million people who visit Department-managed lands each year. For more information

http://www.nwhc.usgs.gov/disease_information/avian_influenza/index.jsp

For more than two decades, the USDA has worked to prepare for and prevent an outbreak of dangerous strains of avian influenza in our country. "Attacking the disease at its source overseas is a main focus for USDA. We also have strict importation restrictions to prevent the spread of the virus in our country and an elaborate surveillance system in place to monitor our bird populations," said Conner. For more information <http://www.usda.gov>

More Fast Facts (Week of Mar. 9, 2006) . . .

Vaccination is one of the most effective ways to minimize sickness and death from influenza. However, there is currently no vaccine available to protect humans against the avian H5N1 influenza virus, which commonly affects birds and has been transmitted to humans in seven countries. Efforts to develop such a vaccine are under way (see Fast Facts).

The United States has been working closely with other countries and the World Health Organization (WHO) to strengthen systems to detect outbreaks of influenza that might cause a pandemic. For more information see [Global Activities](#).

A general rule, the public should observe wildlife, including wild birds, from a distance. This protects you from possible exposure to pathogens and minimizes disturbance to the animal. Avoid touching wildlife. If there is contact with wildlife do not rub eyes, eat, drink, or smoke before washing hands with soap and water. Do not pick up diseased or dead wildlife. Contact your state, tribal, or federal natural resource agency if a sick or dead animal is found.

<http://www.cdc.gov/flu/avian/gen-info/qa.htm>

Pandemic Influenza Update: Reader's Feedback

NOTE: The Pandemic Influenza Update will be published once a month beginning March, 2006. It is prepared by CDC's Priority Communication System. Information in this newsletter is time sensitive and evolving. Readers are welcome to comment by email to PANUPDATE@CDC.GOV

Current Influenza Vaccine Production Timeline 6-9 months

Influenza Vaccine Production Timeline

